

## PART B - FEE(S) TRANSMITTAL

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02292 7590 11/16/2006

BIRCH STEWART KOLASCH & BIRCH, LLP.  
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(Depositor's name)

(Signature)

(Date)

APPLICATION NO.	FILING DATE	MADE INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/734,755	12/12/2003	Chung-Chi Chien	4444-0131P	1991

TITLE OF INVENTION: LIGHTING KEYBOARD AND LIGHTING MODULE THEREOF

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$0	\$1700	02/16/2007
EXAMINER	ART UNIT	CLASS-SUBCLASS		02/16/2007 MAHRED2	00000085 10734755	
OSORIO, RICARDO	2629	345-168000		01 FC:1591 02 FT:1584	1420.00 0P 300.00 0P	
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).	2. For printing on the patent front page, list					
<input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.	(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,					
<input type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.	(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.					

**3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)**

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Compal Electronics, Inc.

Taipei City, Taiwan R.O.C.

Please check the appropriate assignee category or categories (will not be printed on the patent):  Individual  Corporation or other private group entity  Government

4a. The following fee(s) are submitted:

Issue Fee.  
 Publication Fee (No small entity discount permitted)  
 Advance Order - # of Copies 4

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 Payment by credit card. Form PTO-2038 is attached.  
 The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 12-2448 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

(if necessary)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Date February 15, 2007

Typed or printed name

Joe McKinney Muncy

Registration No. 32,334

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